

The Hepatitis C Treatment Series: Part I

Before You Start Hepatitis C Treatment

What treatments can I get by prescription from my doctor?

There are three treatments that have been approved by the Food and Drug Administration (FDA) for hepatitis C virus (HCV) infection.

• Interferon alone (called interferon monotherapy)

Interferon is a protein that causes your body's immune system to attack infected liver cells, and to protect healthy liver cells from new infection. There are several brands of interferon made by different drug companies.

• Interferon combined with ribavirin (called *combination therapy*)

Combination therapy is packaged as Rebetron[®]. Overall, this is much more effective than interferon monotherapy. If you have already had monotherapy treatment, and it didn't work, you may want to think about combination therapy, or experimental treatments.

Note: Combination therapy is not right for all patients with hepatitis C. You must talk with your doctor about the risks and benefits of this therapy before you decide to try it.

• Long-acting interferon (called *pegylated interferon therapy*)

This is a new kind of interferon. The FDA has recently approved it for patients who have never been treated before for hepatitis C.

How long does treatment take?

Treatment time varies. It depends on whether you get your medicine from your regular doctor, or through a clinical trial. In general, standard combination therapy lasts between 24 and 48 weeks, with six months of follow-up after treatment has ended. Sometimes, if the treatment is not working, or if you have too many side effects, your doctor may stop your treatment early.

If you are part of a clinical trial for new medicines, the treatment time will depend on the study design. Your doctor, nurse or clinical trial coordinator will explain the schedule to you before your treatment begins.

How can treatment help me?

Hepatitis C treatments can remove (*clear*) the hepatitis C virus from your blood, but this does not happen in all patients. If this does not happen, there are still some ways that treatment can help you. The treatment can

• decrease the amount of permanent liver damage

- lower the amount of hepatitis C virus in your blood
- improve your overall well being and quality of your life
- lower your alanine aminotransferase (ALT) liver enzyme level

I've heard my doctor talk about different responses to treatment. What are they and what do they mean?

There are three types of response to treatment that describe how treatment works for the patient, including the following:

• Treatment naïve

This means that you have not yet taken medicine to treat hepatitis C.

• Responders (or sustained responders)

This means that the treatment worked while you were taking the medicine, and seemed to work even after you stopped taking it.

• Non-responders

This means that the treatment did not work. Some of the different kinds of non-responders include

• relapsers (or transient responders)

The treatment only worked as long as you took it. When you stopped taking medicine, the hepatitis C virus came back.

o breakthrough non-responders

The treatment worked in the beginning and then stopped working.

o complete non-responders

The treatment did not remove (or *clear*) the virus from your blood.

What will make the treatment more likely to work?

Not everyone will have the same results from hepatitis C treatment. These are some things that can affect the treatment and how well it works, including the following:

• Viral genotype

Not all hepatitis C viruses are exactly the same. We know of six different genotypes for hepatitis C. Some of them respond better to treatment than others.

• Viral load

This is the amount of virus in your blood. If you have lower levels of virus in your blood when you start treatment, you may have a better chance of getting rid of the virus.

Note: A high viral load does not necessarily mean you have worse liver damage.

Iron

If you have less iron in your blood, or in your liver cells, your treatment may work better. Iron levels can be checked with a blood test or a liver biopsy.

• Gender

Hepatitis C treatment works slightly better for women than for men.

Age

If you got the virus before the age of 40, the chance of treatment working for you may be better than if you became infected in older age.

• Length of infection

You may have a better chance of clearing the virus from your body if you haven't been infected with the hepatitis C virus for very long.

Do I have to get a liver biopsy to start treatment?

Sometimes your doctor may ask you to have a biopsy before you start treatment. This tells how much damage there is in your liver, and can help you decide when to start treatment. Your doctor may also ask you to have a biopsy after treatment is finished.

When should I start treatment?

It is a good idea to talk about treatment with your doctor and family first. Only you can decide when to start. In general, doctors strongly suggest treatment if you

- have high liver enzymes, especially ALT levels
- had a test that showed hepatitis C virus in your blood
- had a liver biopsy that showed scarring (fibrosis) or inflammation
- have NOT used alcohol or other drugs for at least six months

If I want to start treatment, what should I do now?

If you want to start treatment for hepatitis C, speak with your VA doctor. It is a good idea to talk about any concerns you have before you start treatment. Your doctor and you will decide if treatment is right for you and which medicines might work.

Who can I call for more information?

- Your local VA medical center and visit http://www.va.gov/hepatitisc
- The Centers for Disease Control & Prevention (CDC) (888) 4HEPCDC [(888) 443-7232] and visit http://www.cdc.gov/ncidod/diseases/hepatitis